

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

PO Box 25406

☐Check if different
than previously
reported. (ACC)

Portland

OR

97298

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2008

through

08

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dennis Morgan

Signature of Treasurer

Electronically Filed by Dennis Morgan

Date

06

01

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		7182.41
(b) Cash on Hand at Beginning of Reporting Period	138885.18	
(c) Total Receipts (from Line 19)	92627.64	721409.94
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	231512.82	728592.35
7. Total Disbursements (from Line 31)	135434.77	632514.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	96078.05	96078.05
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	245591.16	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M M D D Y Y W Y
0 8 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 8 3 1 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4380.00	74552.00
(i) Itemized (use Schedule A)	7576.50	116197.11
(ii) Unitemized	11956.50	190749.11
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	0.00	11000.00
(c) Other Political Committees (such as PACs)	11956.50	201749.11
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤		
12. Transfers From Affiliated/Other Party Committees	58000.00	368243.32
13. All Loans Received	0.00	40000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	675.37	19897.36
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	118.75
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	21995.77	91401.40
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	21995.77	91401.40
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92627.64	721409.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	70631.87	630008.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	20080.01	86744.57
(ii) Non-Federal Share.....	35697.78	154212.47
(b) Other Federal Operating Expenditures.....	8037.16	102750.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	63814.95	343707.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	10287.72
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	1600.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	71619.82	276918.88
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	71619.82	276918.88
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	135434.77	632514.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	99736.99	478301.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11956.50	201749.11
34. Total Contribution Refunds (from Line 28(d))	0.00	1600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11956.50	200149.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28117.17	189495.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	675.37	19897.36
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27441.80	169597.87

Form/Schedule : **F3XA**

Transaction ID :

Memo: Note that on Schedule D, payments towards expense reimbursements in the amounts of \$2,219.84 to Andrew Over, \$1,433.63 to Kaitlyn Shimmin, \$781.78 to Kevin Hoar, \$623.43 to Matthew Dobler, \$604.22 to Steven Ostrow and \$750 paid towards Discover Card debt are properly reflected in the Outstanding Balance at Close of This Period box, but, not in the Payment This Period box. The Committees software contains an error that affects the proper disclosure of payments against debt when those payments require memo entries on Schedule B or H4. The Committee is working with the software vendor to resolve this issue.

SCHEDULE L (FEC Form 3X)

7 / 72

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full)
Oregon Republican Party

NAME OF ACCOUNT
KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	3636.50
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	3636.50
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	3636.50
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	3636.50
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	3636.50	3636.50
8. RECEIPTS..... (from Line 3)	0.00	3636.50
9. SUBTOTAL..... (Add Lines 7 and 8)	3636.50	7273.00
10. DISBURSEMENTS..... (From Line 6)	0.00	3636.50
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	3636.50	3636.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

William Bishop

Mailing Address 6825 SW Raleighwood Ln

City

Portland

State

OR

Zip Code

97225-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 0 8

Transaction ID: 90219.C96981

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kenneth Knott

Mailing Address 59926 Comstock Rd.

City

Cove

State

OR

Zip Code

97824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Rancher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 0 8

Transaction ID: 90219.C96942

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Jim Lynch

Mailing Address PO Box 350

City

Lakeview

State

OR

Zip Code

97630-0013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lynch & Vandenberg

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 8

Transaction ID: 90219.C96871

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Lois OBrien

Mailing Address 3785 NW 183rd Ave

City

Portland

State

OR

Zip Code

97229-3319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: 90219.C96992

Amount of Each Receipt this Period

30.00

Receipt

B.

Full Name (Last, First, Middle Initial)

James Russell

Mailing Address 1820 NE 104th Ave Apt 66

City

Portland

State

OR

Zip Code

97220-3819

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: 90219.C96952

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lawrence M. Smith

Mailing Address 7778 SW Green Valley Ter

City

Portland

State

OR

Zip Code

97225-1568

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 8

Transaction ID: 90219.C96747

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

580.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Bond Starker

Mailing Address PO Box 809

City

Corvallis

State

OR

Zip Code

97339-0809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starker Forests

Occupation
Forester

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 0 8

Transaction ID: 90219.C96954

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lulu Stephens

Mailing Address 5758 NE Emerson St

City

Portland

State

OR

Zip Code

97218-2406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 8

Transaction ID: 90219.C96763

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John Todd

Mailing Address 15515 NW Norwich St

City

Beaverton

State

OR

Zip Code

97006-5337

FEC ID number of contributing
federal political committee.

C

Name of Employer
Todd Construction

Occupation
Builder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 8

Transaction ID: 90219.C96904

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 72

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Donna Woolley

Mailing Address PO Box 43

City

Drain

State

OR

Zip Code

97435-0043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eagles View Management

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 8

Transaction ID: 90219.C96937

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Ourania Yue

Mailing Address 265 50th Ave NW

City

Salem

State

OR

Zip Code

97304-3221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 8

Transaction ID: 90219.C96941

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Solomon Yue

Mailing Address 265 50th Ave NW

City

Salem

State

OR

Zip Code

97304-3221

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Global Enterprising Co-
rp

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 8

Transaction ID: 90219.C96939

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

4380.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 72

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
Washington DC 20003-FEC ID number of contributing
federal political committee.**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

104000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 8

Transaction ID: 90219.C96734

Amount of Each Receipt this Period

6000.00

Transfers From Affil./Aut-
h.**B.**Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
Washington DC 20003-FEC ID number of contributing
federal political committee.**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

154000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 8 / 2 0 0 8

Transaction ID: 90219.C96945

Amount of Each Receipt this Period

50000.00

Transfers From Affil./Aut-
h.**C.**Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
Washington DC 20003-FEC ID number of contributing
federal political committee.**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

156000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 8

Transaction ID: 90219.C97007

Amount of Each Receipt this Period

2000.00

Transfers From Affil./Aut-
h.**SUBTOTAL** of Receipts This Page (optional)

58000.00

TOTAL This Period (last page this line number only)

58000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 72

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	--	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

John McCain 2008 Inc.

Mailing Address PO Box 16118

City

Arlington

State

VA

Zip Code

22215-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Reimbursement for Rent

Occupation

Reimbursement for Rent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	0	8

Transaction ID: 90219.C96953

Amount of Each Receipt this Period

675.37

Offsets to Operating Expe-
nditu

SUBTOTAL of Receipts This Page (optional)

675.37

TOTAL This Period (last page this line number only)

675.37

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 72

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Key Bank	Transaction ID: 90219.E14311 Date of Disbursement																				
Mailing Address PO Box 22114	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	8		2	0	0	8												
City Albany State NY Zip Code 12201- Purpose of Disbursement Bank Fees Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>89.43</td> </tr> </table>	89.43																			
89.43																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type BANK FEES																				
B. Full Name (Last, First, Middle Initial) Key Bank	Transaction ID: 90219.E14325 Date of Disbursement																				
Mailing Address PO Box 22114	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	8												
City Albany State NY Zip Code 12201- Purpose of Disbursement Bank Fees Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>7.00</td> </tr> </table>	7.00																			
7.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type BANK FEES																				
C. Full Name (Last, First, Middle Initial) Carley Dillon	Transaction ID: 90219.E14277 Date of Disbursement																				
Mailing Address 14511 Pfeifer Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	9		2	0	0	8												
City Lake Oswego State OR Zip Code 97035-2419 Purpose of Disbursement Food/OR GOP Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>47.43</td> </tr> </table>	47.43																			
47.43																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type FOOD/OR GOP																				

SUBTOTAL of Disbursements This Page (optional)

143.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 72

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 90219.E14192 Date of Disbursement																				
Mailing Address 12450 Automobile Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period																				
Purpose of Disbursement List rental - OR GOP	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ LIST RENTAL - OR GOP																				
B. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 90219.E14193 Date of Disbursement																				
Mailing Address 12450 Automobile Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	8		2	0	0	8												
City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period																				
Purpose of Disbursement List rental - OR GOP	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ LIST RENTAL - OR GOP																				
C. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 90219.E14284 Date of Disbursement																				
Mailing Address 12450 Automobile Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	9		2	0	0	8												
City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period																				
Purpose of Disbursement List rental - OR GOP	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ LIST RENTAL - OR GOP																				

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Matthew Dobler	Transaction ID: 90219.E14263 Date of Disbursement																				
Mailing Address 801 Canary Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Lake Elsinore State CA Zip Code 92530- Purpose of Disbursement Reimbursement--See below Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>6</td><td>2</td><td>3</td><td>.</td><td>4</td><td>3</td> </tr> </table>	6	2	3	.	4	3														
6	2	3	.	4	3																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type REIMBURSEMENT--SEE BELOW																				
B. Full Name (Last, First, Middle Initial) US Airways	Transaction ID: 90219.E14264 Date of Disbursement																				
Mailing Address 4000 E Sky Harbor Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Phoenix State AZ Zip Code 85034-3802 Purpose of Disbursement Travel Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>4</td><td>8</td><td>.</td><td>4</td><td>9</td> </tr> </table>	3	4	8	.	4	9														
3	4	8	.	4	9																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type [MEMO ITEM] MEMO: TRAVEL																				
C. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E14207 Date of Disbursement																				
Mailing Address 7320 N Dreamy Draw Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Phoenix State AZ Zip Code 85020-5212 Purpose of Disbursement Fundraising Phone Calls - OR GOP Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	3	0	.	0	0															
3	0	.	0	0																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type FUNDRAISING PHONE CALLS - OR GOP																				

SUBTOTAL of Disbursements This Page (optional)

653.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14209

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

FUNDRAISING PHONE CALLS -
OR GOP

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14205

Date of Disbursement

/ /

Amount of Each Disbursement this Period

102.50

FUNDRAISING PHONE CALLS -
OR GOP

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14211

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

FUNDRAISING PHONE CALLS -
OR GOP

SUBTOTAL of Disbursements This Page (optional)

602.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 72

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14215
Date of Disbursement

/ /

Amount of Each Disbursement this Period

345.00

FUNDRAISING PHONE CALLS -
OR GOP

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14213
Date of Disbursement

/ /

Amount of Each Disbursement this Period

25.00

FUNDRAISING PHONE CALLS -
OR GOP

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14219
Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.00

FUNDRAISING PHONE CALLS -
OR GOP

SUBTOTAL of Disbursements This Page (optional)

410.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 72

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: 90219.E14221

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

125.00

FUNDRAISING PHONE CALLS - OR GOP

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: 90219.E14223

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

1646.00

FUNDRAISING PHONE CALLS - OR GOP

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: 90219.E14217

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

5.00

FUNDRAISING PHONE CALLS - OR GOP

SUBTOTAL of Disbursements This Page (optional)

1776.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 72

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E14254 Date of Disbursement																				
Mailing Address 7320 N Dreamy Draw Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	2		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	2		2	0	8													
City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Phone Calls - OR GOP	<table border="1"> <tr> <td colspan="10">221.55</td> </tr> </table>	221.55																			
221.55																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	FUNDRAISING PHONE CALLS - OR GOP																				
B. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E14309 Date of Disbursement																				
Mailing Address 7320 N Dreamy Draw Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	9		2	0	8													
City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Phone Calls - OR GOP	<table border="1"> <tr> <td colspan="10">165.08</td> </tr> </table>	165.08																			
165.08																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	FUNDRAISING PHONE CALLS - OR GOP																				
C. Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 90219.E14307 Date of Disbursement																				
Mailing Address 7320 N Dreamy Draw Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	8	
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	9		2	0	8													
City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Phone Calls - OR GOP	<table border="1"> <tr> <td colspan="10">5.00</td> </tr> </table>	5.00																			
5.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:	FUNDRAISING PHONE CALLS - OR GOP																				

SUBTOTAL of Disbursements This Page (optional)

391.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14305
Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

185.00

FUNDRAISING PHONE CALLS -
OR GOP

B.

Full Name (Last, First, Middle Initial)
Kevin Hoar

Mailing Address 12563 NW Millford St

City Portland State OR Zip Code 97229-9303

Purpose of Disbursement
Reimbursement--See below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14248
Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

781.78

REIMBURSEMENT--SEE BELOW

C.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 10246 Washington Square Rd SW

City Beaverton State OR Zip Code 97005-

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14249
Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

587.99

[MEMO ITEM]
MEMO: TRAVEL

SUBTOTAL of Disbursements This Page (optional)

966.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Key Merchants	Transaction ID: 90219.E14170 Date of Disbursement																				
Mailing Address 7300 Chapman Highway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	8												
City Knoxville State TN Zip Code 37920- Purpose of Disbursement Credit card fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>1</td><td>9</td><td>.</td><td>5</td><td>3</td> </tr> </table>	1	1	9	.	5	3														
1	1	9	.	5	3																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type CREDIT CARD FEE																				
B. Full Name (Last, First, Middle Initial) Steven Ostrow	Transaction ID: 90219.E14260 Date of Disbursement																				
Mailing Address 7702 Rocio St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	6		2	0	0	8												
City Carlsbad State CA Zip Code 92009-8037 Purpose of Disbursement Reimbursement--See below Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>6</td><td>0</td><td>4</td><td>.</td><td>2</td><td>2</td> </tr> </table>	6	0	4	.	2	2														
6	0	4	.	2	2																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type REIMBURSEMENT--SEE BELOW																				
C. Full Name (Last, First, Middle Initial) Delta Air	Transaction ID: 90219.E14261 Date of Disbursement																				
Mailing Address PO Box 20706	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	6		2	0	0	8												
City Portland State OR Zip Code 97294-0706 Purpose of Disbursement Travel Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>4</td><td>0</td><td>1</td><td>.</td><td>0</td><td>0</td> </tr> </table>	4	0	1	.	0	0														
4	0	1	.	0	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type [MEMO ITEM] MEMO: TRAVEL																				

SUBTOTAL of Disbursements This Page (optional)

723.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Kaitlyn Shimmin

Mailing Address 11 Arch Bay

City Laguna Niguel State CA Zip Code 92677-

Purpose of Disbursement
Reimbursement--See below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14257

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

1433.63

REIMBURSEMENT--SEE BELOW

B.

Full Name (Last, First, Middle Initial)
Costco Tigard

Mailing Address 7855 SW Dartmouth Rd

City Tigard State OR Zip Code 97223-8401

Purpose of Disbursement
Food

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14259

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

34.63

[MEMO ITEM]

MEMO: FOOD

C.

Full Name (Last, First, Middle Initial)
Delta Air

Mailing Address PO Box 20706

City Portland State OR Zip Code 97294-0706

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90219.E14258

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

1399.00

[MEMO ITEM]

MEMO: TRAVEL

SUBTOTAL of Disbursements This Page (optional)

1433.63

TOTAL This Period (last page this line number only)

7851.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Thomas Beyea	Transaction ID: 90219.E14289 Date of Disbursement 08 / 29 / 2008
	Mailing Address 12103 NW 11th Ave	
	City Vancouver State WA Zip Code 98685-2461	Amount of Each Disbursement this Period 942.15
	Purpose of Disbursement FEA Payroll	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL
B.	Full Name (Last, First, Middle Initial) Matthew Dobler	Transaction ID: 90219.E14270 Date of Disbursement 08 / 15 / 2008
	Mailing Address 801 Canary Court	
	City Lake Elsinore State CA Zip Code 92530-	Amount of Each Disbursement this Period 1180.95
	Purpose of Disbursement FEA Payroll	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL
C.	Full Name (Last, First, Middle Initial) Matthew Dobler	Transaction ID: 90219.E14290 Date of Disbursement 08 / 29 / 2008
	Mailing Address 801 Canary Court	
	City Lake Elsinore State CA Zip Code 92530-	Amount of Each Disbursement this Period 1258.95
	Purpose of Disbursement FEA Payroll	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3382.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Erin Edelen

Mailing Address PO Box 292

City Carlton State OR Zip Code 97111-0292

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14267
Date of Disbursement

/ /

Amount of Each Disbursement this Period

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Erin Edelen

Mailing Address PO Box 292

City Carlton State OR Zip Code 97111-0292

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14288
Date of Disbursement

/ /

Amount of Each Disbursement this Period

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)
Faulkner Strategies LLC

Mailing Address 12801 Sandy Ct

City Granger State IN Zip Code 46530-4309

Purpose of Disbursement
Volunteer-exempt yard signs

Candidate Name
GORDON HAROLD SMITH

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: OR District: 00

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14256
Date of Disbursement

/ /

Amount of Each Disbursement this Period

VOLUNTEER-EXEMPT YARD SIG-
NS

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 72

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Kevin Hoar

Mailing Address 12563 NW Millford St

City Portland State OR Zip Code 97229-9303

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14271
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1048.16

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Kevin Hoar

Mailing Address 12563 NW Millford St

City Portland State OR Zip Code 97229-9303

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14296
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1048.15

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)
Brienne Hyder

Mailing Address 7068 SW Valenta Ct

City Portland State OR Zip Code 97223-2260

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14251
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1870.93

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3967.24

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Brianne Hyder	Transaction ID: 90219.E14286 Date of Disbursement																				
Mailing Address 7068 SW Valenta Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	9		2	0	0	8												
City Portland State OR Zip Code 97223-2260	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA Payroll	<table border="1"> <tr> <td colspan="10">1870.93</td> </tr> </table>	1870.93																			
1870.93																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA PAYROLL																				
B. Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 90219.E14136 Date of Disbursement																				
Mailing Address c/o Key Bank 1500 Edgewater St NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA Payroll Taxes	<table border="1"> <tr> <td colspan="10">6732.15</td> </tr> </table>	6732.15																			
6732.15																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA PAYROLL TAXES																				
C. Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 90219.E14135 Date of Disbursement																				
Mailing Address c/o Key Bank 1500 Edgewater St NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	1		2	0	0	8												
City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA Payroll Taxes	<table border="1"> <tr> <td colspan="10">153.07</td> </tr> </table>	153.07																			
153.07																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA PAYROLL TAXES																				

SUBTOTAL of Disbursements This Page (optional)**8756.15****TOTAL** This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2754.21

FEA PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14173

Date of Disbursement

/ /

Amount of Each Disbursement this Period

26.80

FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14174

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2050.20

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

4831.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14171

Date of Disbursement

/ /

Amount of Each Disbursement this Period

63.33

FEA PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)
United States Treasury

Mailing Address US Department of Treasury

City Ogden State UT Zip Code 84403-

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14187

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3282.11

FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Oregon Department of Revenue

Mailing Address P.O. Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14745

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2201.94

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

5547.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Oregon Department of Revenue

Mailing Address P.O. Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14746

Date of Disbursement

/ /

Amount of Each Disbursement this Period

814.84

FEA PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)
Oregon Department of Revenue

Mailing Address P.O. Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14747

Date of Disbursement

/ /

Amount of Each Disbursement this Period

716.39

FEA PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
Steven Ostrow

Mailing Address 7702 Rocio St

City Carlsbad State CA Zip Code 92009-8037

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14272

Date of Disbursement

/ /

Amount of Each Disbursement this Period

915.16

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2446.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Steven Ostrow

Mailing Address 7702 Rocio St

City Carlsbad State CA Zip Code 92009-8037

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14295

Date of Disbursement

/ /

Amount of Each Disbursement this Period

915.15

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Andrew Over

Mailing Address 1485 SW 134th Ave

City Beaverton State OR Zip Code 97005-0986

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14774

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2378.10

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)
Andrew Over

Mailing Address 1485 SW 134th Ave

City Beaverton State OR Zip Code 97005-0986

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14775

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2378.11

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

5671.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Nicholas Reed

Mailing Address 3404 Pioneer Dr SE

City State Zip Code
Salem OR 97302-3316

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14265
Date of Disbursement

/ /

Amount of Each Disbursement this Period

487.88

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Nicholas Reed

Mailing Address 3404 Pioneer Dr SE

City State Zip Code
Salem OR 97302-3316

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14299
Date of Disbursement

/ /

Amount of Each Disbursement this Period

487.88

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)
Gary Schmidt

Mailing Address 14462 SE Bridgeton St

City State Zip Code
Clackamas OR 97015-6270

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14269
Date of Disbursement

/ /

Amount of Each Disbursement this Period

942.15

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1917.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Gary Schmidt

Mailing Address 14462 SE Bridgeton St

City Clackamas State OR Zip Code 97015-6270

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14294

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

942.16

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)

Kaitlyn Shimmin

Mailing Address 11 Arch Bay

City Laguna Niguel State CA Zip Code 92677-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14273

Date of Disbursement

08 / 15 / 2008

Amount of Each Disbursement this Period

915.16

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)

Kaitlyn Shimmin

Mailing Address 11 Arch Bay

City Laguna Niguel State CA Zip Code 92677-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14293

Date of Disbursement

08 / 29 / 2008

Amount of Each Disbursement this Period

915.15

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2772.47

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Smith Barney Investments	Transaction ID: 90219.E14186 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8
	Mailing Address 121 SW Morrison St Ste 1600	
	City Portland State OR Zip Code 97204-3146	Amount of Each Disbursement this Period 443.75
	Purpose of Disbursement FEA IRA Contributions	FEA IRA CONTRIBUTIONS
	Candidate Name	
	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Smith Barney Investments	Transaction ID: 90219.E14285 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	Mailing Address 121 SW Morrison St Ste 1600	
	City Portland State OR Zip Code 97204-3146	Amount of Each Disbursement this Period 443.75
	Purpose of Disbursement FEA IRA Contributions	FEA IRA CONTRIBUTIONS
	Candidate Name	
	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Kelly Stevens	Transaction ID: 90219.E14274 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8
	Mailing Address 5349 Main Ave	
	City Orangevale State CA Zip Code 95662-5614	Amount of Each Disbursement this Period 915.16
	Purpose of Disbursement FEA Payroll	FEA PAYROLL
	Candidate Name	
	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1802.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 72

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Kelly Stevens	Transaction ID: 90219.E14292 Date of Disbursement
Mailing Address 5349 Main Ave	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 29 / 2008</div> </div>
City Orangevale State CA Zip Code 95662-5614	Amount of Each Disbursement this Period <div>915.15</div>
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA PAYROLL
B. Full Name (Last, First, Middle Initial) Chase Tedrow	Transaction ID: 90219.E14275 Date of Disbursement
Mailing Address 1306 Wallace Rd NW Apt 6	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 15 / 2008</div> </div>
City Salem State OR Zip Code 97304-3076	Amount of Each Disbursement this Period <div>1002.16</div>
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA PAYROLL
C. Full Name (Last, First, Middle Initial) Chase Tedrow	Transaction ID: 90219.E14291 Date of Disbursement
Mailing Address 1306 Wallace Rd NW Apt 6	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 29 / 2008</div> </div>
City Salem State OR Zip Code 97304-3076	Amount of Each Disbursement this Period <div>1002.15</div>
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2919.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Janice Williamson

Mailing Address 4065 Mandy Ave SE

City Salem State OR Zip Code 97302-1712

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14266
Date of Disbursement

/ /

Amount of Each Disbursement this Period

898.15

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Janice Williamson

Mailing Address 4065 Mandy Ave SE

City Salem State OR Zip Code 97302-1712

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90219.E14298
Date of Disbursement

/ /

Amount of Each Disbursement this Period

898.16

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1796.31

TOTAL This Period (last page this line number only)

71424.65

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93909

LOAN SOURCE Full Name (Last, First, Middle Initial)
F. Douglas Day

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 4386 Rowan Ave N

City Keizer State OR ZIP Code 97303-5824

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 4Y Y Y Y
2 0 0 8

20091231

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 38 / 72

FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93964

LOAN SOURCE Full Name (Last, First, Middle Initial)
Michael Scheel

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20091231

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

LOANSNAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93966

LOAN SOURCE Full Name (Last, First, Middle Initial)
Donald Malarkey

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 2495 E Nob Hill St SE

City Salem State OR ZIP Code 97302-3733

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 0Y Y Y Y
2 0 0 8

20091231

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93965

LOAN SOURCE Full Name (Last, First, Middle Initial)
Julie Scheel

Election:

☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20091231

8.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

40000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Arena CommunicationsNature of Debt (Purpose):
Printing

Mailing Address 515 South 700 East, Suite 2C

City State ZIP Code
Salt Lake City UT 84102-

Outstanding Balance Beginning This Period

5256.00

Transaction ID: LS90219.E16743

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5256.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS ConnectNature of Debt (Purpose):
Fundraising Phone Calls -
OR GOP

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

46003.24

Transaction ID: LS90219.E14205

Amount Incurred This Period

3282.63

Payment This Period

3395.13

Outstanding Balance at Close of This Period

45890.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, IncNature of Debt (Purpose):
List Rental - OR GOP

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

22393.77

Transaction ID: LS90219.E14192

Amount Incurred This Period

6313.34

Payment This Period

750.00

Outstanding Balance at Close of This Period

27957.11

1) **SUBTOTALS** This Period This Page (optional).....

79103.85

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 42 / 72

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wes LemattaNature of Debt (Purpose):
Contribution Refund

Mailing Address 800 NE Tenney Rd Ste 110

City State ZIP Code
Vancouver WA 98685-2899

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS90219.E16256

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Office DepotNature of Debt (Purpose):
Office supplies

Mailing Address 10520 SW Cascade Ave

City State ZIP Code
Portland OR 97223-4302

Outstanding Balance Beginning This Period

107.11

Transaction ID: LS90219.E14201

Amount Incurred This Period

0.00

Payment This Period

73.82

Outstanding Balance at Close of This Period

33.29

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Donna WoolleyNature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 43

City State ZIP Code
Drain OR 97435-0043

Outstanding Balance Beginning This Period

6000.00

Transaction ID: LS90219.E16587

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional).....

8533.29

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joan AustinNature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 209

City State ZIP Code
Newberg OR 97132-0209

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS90219.E15760

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dell FinancialNature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 120001

City State ZIP Code
Dallas TX 75312-

Outstanding Balance Beginning This Period

126.30

Transaction ID: LS90219.E14199

Amount Incurred This Period

0.00

Payment This Period

126.30

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage - OR GOP

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-6042

Outstanding Balance Beginning This Period

5356.24

Transaction ID: LS90219.E14188

Amount Incurred This Period

523.97

Payment This Period

1781.78

Outstanding Balance at Close of This Period

4098.43

1) **SUBTOTALS** This Period This Page (optional).....

6598.43

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kevin HoarNature of Debt (Purpose):
Travel

Mailing Address 12563 NW Millford St

City State ZIP Code
Portland OR 97229-9303

Outstanding Balance Beginning This Period

587.99

Transaction ID: LS90219.E16754

Amount Incurred This Period

297.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

104.07

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T WirelessNature of Debt (Purpose):
Phone service

Mailing Address PO Box 30459

City State ZIP Code
Los Angeles CA 90030-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LS90219.E11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Integra TelecomNature of Debt (Purpose):
Phone service

Mailing Address PO Box 34988

City State ZIP Code
Seattle WA 98124-1988

Outstanding Balance Beginning This Period

154.99

Transaction ID: LS90219.E14198

Amount Incurred This Period

0.00

Payment This Period

154.99

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

67284.97

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Andrew OverNature of Debt (Purpose):
Office Supplies/Postage
ORGOP

Mailing Address 1485 SW 134th Ave

City State ZIP Code
Beaverton OR 97005-0986

Outstanding Balance Beginning This Period

681.86

Transaction ID: LS90219.E16742

Amount Incurred This Period

1950.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

412.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ricoh Customer Finance Corp.Nature of Debt (Purpose):
Equipment Lease

Mailing Address PO Box 310010273

City State ZIP Code
Pasadena CA 91110-0001

Outstanding Balance Beginning This Period

227.05

Transaction ID: LS90219.E14194

Amount Incurred This Period

159.00

Payment This Period

386.05

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Robert FreresNature of Debt (Purpose):
Excess Levin Contribution
Refund

Mailing Address PO Box 276

City State ZIP Code
Lyons OR 97358-0276

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS90219.E13313

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

2912.82

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Barbs Professional Bookkeeping &TaxNature of Debt (Purpose):
Compliance Consulting

Mailing Address 3295 Triangle Dr SE Ste 112

City State ZIP Code
Salem OR 97302-4566

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS90219.E16789

Amount Incurred This Period

90.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

90.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Corporate CardNature of Debt (Purpose):
Travel/office supplies

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

6714.13

Transaction ID: LS90219.E16295

Amount Incurred This Period

204.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

6168.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IN Compliance Inc.Nature of Debt (Purpose):
Compliance Consulting

Mailing Address PO Box 751271

City State ZIP Code
Las Vegas NV 89131-

Outstanding Balance Beginning This Period

12441.30

Transaction ID: LS90219.E14191

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

9441.30

1) SUBTOTALS This Period This Page (optional).....

15700.03

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
D.R. Johnson Lumber Co.Nature of Debt (Purpose):
Excess Levin Contribution
Refund

Mailing Address PO Box 66

City State ZIP Code
Riddle OR 97469-

Outstanding Balance Beginning This Period

10000.00

Transaction ID: LS90219.E13314

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
World Trade Center & CateringNature of Debt (Purpose):
Catering/ORGOP

Mailing Address PO Box 3340

City State ZIP Code
Portland OR 97208-

Outstanding Balance Beginning This Period

1261.04

Transaction ID: LS90219.E14180

Amount Incurred This Period

0.00

Payment This Period

1261.04

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Brienne HyderNature of Debt (Purpose):
Office Supplies/Postage/P-
hone Expen

Mailing Address 7068 SW Valenta Ct

City State ZIP Code
Portland OR 97223-2260

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS90219.E16791

Amount Incurred This Period

1099.56

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.53

1) **SUBTOTALS** This Period This Page (optional).....

11050.53

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 48 / 72

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Complete CampaignsNature of Debt (Purpose):
Computer Support

Mailing Address 3635 Ruffin Rd Fl 3

City State ZIP Code
San Diego CA 92123-1880

Outstanding Balance Beginning This Period

250.00

Transaction ID: LS90219.E14202

Amount Incurred This Period

0.00

Payment This Period

250.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Donald MalarkeyNature of Debt (Purpose):
Contribution Refund

Mailing Address 2495 E Nob Hill St SE

City State ZIP Code
Salem OR 97302-3733

Outstanding Balance Beginning This Period

100.00

Transaction ID: LS90219.E16910

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Oregon Federation of College RepublicansNature of Debt (Purpose):
Contribution Refund

Mailing Address PO Box 808

City State ZIP Code
Corvallis OR 97339-0808

Outstanding Balance Beginning This Period

550.00

Transaction ID: LS90219.E16376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

550.00

1) **SUBTOTALS** This Period This Page (optional).....

650.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 49 / 72

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Gary SchmidtNature of Debt (Purpose):
Office Supplies

Mailing Address 14462 SE Bridgeton St

City State ZIP Code
Clackamas OR 97015-6270

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS90219.E16800

Amount Incurred This Period

34.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

34.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Compliance Consulting CompanyNature of Debt (Purpose):
Compliance Consulting

Mailing Address PO Box 365

City State ZIP Code
Mc Lean VA 22101-0365

Outstanding Balance Beginning This Period

12000.00

Transaction ID: LS90219.E14197

Amount Incurred This Period

12000.00

Payment This Period

12000.00

Outstanding Balance at Close of This Period

12000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dell Marketing LPNature of Debt (Purpose):
Computer Equipment

Mailing Address PO Box 643561

City State ZIP Code
Pittsburgh PA 15264-3561

Outstanding Balance Beginning This Period

1468.35

Transaction ID: LS90219.E14244

Amount Incurred This Period

0.00

Payment This Period

1468.35

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

12034.99

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 50 / 72

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Steven OstrowNature of Debt (Purpose):
Travel

Mailing Address 7702 Rocio St

City State ZIP Code
Carlsbad CA 92009-8037

Outstanding Balance Beginning This Period

604.22

Transaction ID: LS90219.E16762

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kaitlyn ShimminNature of Debt (Purpose):
Travel

Mailing Address 11 Arch Bay

City State ZIP Code
Laguna Niguel CA 92677-

Outstanding Balance Beginning This Period

1433.63

Transaction ID: LS90219.E16752

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Matthew DoblerNature of Debt (Purpose):
Mileage/Food/Office Supplies

Mailing Address 801 Canary Court

City State ZIP Code
Lake Elsinore CA 92530-

Outstanding Balance Beginning This Period

623.43

Transaction ID: LS90219.E16757

Amount Incurred This Period

770.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

770.06

1) SUBTOTALS This Period This Page (optional).....

770.06

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 51 / 72

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MicroAgeNature of Debt (Purpose):
Computer Equipment

Mailing Address PO Box 2941

City State ZIP Code
Phoenix AZ 85062-2941

Outstanding Balance Beginning This Period

5782.43

Transaction ID: LS90219.E14245

Amount Incurred This Period

0.00

Payment This Period

5782.43

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bryan WatkinsNature of Debt (Purpose):
Office Supplies

Mailing Address 6142 Bonita Rd # H-205

City State ZIP Code
Lake Oswego OR 97035-3223

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS90219.E16799

Amount Incurred This Period

253.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

253.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Graphix PlusNature of Debt (Purpose):
Printing - OR GOP

Mailing Address 151 NW 3rd Ave

City State ZIP Code
Canby OR 97013-3701

Outstanding Balance Beginning This Period

698.38

Transaction ID: LS90219.E16750

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

698.38

1) SUBTOTALS This Period This Page (optional).....

952.19

2) TOTALS This Period (last page this line number only).....

205591.16

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

40000.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

245591.16

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 52 / 72
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NON-FED STA-
TE ACCT c/o Key Ba-
nk

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	8

TOTAL AMOUNT TRANSFERRED

16008.83

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

16008.83

Transaction ID: H390219.C96769

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 53 / 72
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NON-FED STA-
TE ACCT c/o Key Ba-
nk

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 8 / 0 6 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

2345.36

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

2345.36

Transaction ID: H390219.C96979

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 54 / 72
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NON-FED STA-
TE ACCT c/o Key Ba-
nk

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 8 / 2 2 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

2512.50

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

2512.50

Transaction ID: H390219.C96980

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 55 / 72
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

OREGON NON-FED STA-
TE ACCT c/o Key Ba-
nk

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

TOTAL AMOUNT TRANSFERRED

1129.08

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1129.08

Transaction ID: H390219.C97005

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

21995.77

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

21995.77

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 56 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Textron Financial

Mailing Address

40 Westminster Street

City State Zip Code

Providence RI 02903-

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194053.63

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: H490219.E14130

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1297.66

2306.96

3604.62

B. Full Name (Last, First, Middle Initial)

Gene Biggi Properties

Mailing Address

3800 SW Cedar Hills Blvd Ste 101

City State Zip Code

Beaverton OR 97005-2003

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189949.01

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: H490219.E14131

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

468.00

832.00

1300.00

C. Full Name (Last, First, Middle Initial)

Harlande Clarke

Mailing Address

10931 Laureate Drive

City State Zip Code

San Antonio TX 78249-

Purpose of Disbursement:
Office suppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

228754.68

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	6	/	2	0	0	8

Transaction ID: H490219.E14138

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.35

66.41

103.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1803.01

3205.37

5008.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 57 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:
Catering/ORGOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194303.63

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: H490219.E14180

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

B. Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:
Catering/ORGOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

210869.51

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	0	8

Transaction ID: H490219.E14181

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

C. Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:
Catering/ORGOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

217151.94

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	8	/	2	0	0	8

Transaction ID: H490219.E14182

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

270.00

480.00

750.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 58 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 World Trade Center & Catering

Mailing Address

PO Box 3340

City State Zip Code

Portland OR 97208-

Purpose of Disbursement:
 Catering/ORGOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

222487.26

Date M M / D D / Y Y Y Y
 08 / 22 / 2008

Transaction ID: H490219.E14184

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.00

160.00

250.00

B. Full Name (Last, First, Middle Initial)
 Pitney Bowes Purchase Power

Mailing Address

PO Box 856042

City State Zip Code

Louisville KY 40285-6042

Purpose of Disbursement:
 Postage - OR GOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

187111.03

Date M M / D D / Y Y Y Y
 08 / 01 / 2008

Transaction ID: H490219.E14189

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

641.44

1140.34

1781.78

C. Full Name (Last, First, Middle Initial)
 South Salem Mini Storage

Mailing Address

5585 SE Commercial St

City State Zip Code

Salem OR 97306-

Purpose of Disbursement:
 Facility Rental - OR GOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

185329.25

Date M M / D D / Y Y Y Y
 08 / 01 / 2008

Transaction ID: H490219.E14190

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

54.00

96.00

150.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

785.44

1396.34

2181.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 IN Compliance Inc.

Mailing Address

PO Box 751271

City	State	Zip Code
Las Vegas	NV	89131-

Purpose of Disbursement:
 Compliance Consulting

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

210619.51

Date

M	M
0	8

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14191

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1080.00		1920.00		3000.00

B. Full Name (Last, First, Middle Initial)
 Ricoh Customer Finance Corp.

Mailing Address

PO Box 310010273

City	State	Zip Code
Pasadena	CA	91110-0001

Purpose of Disbursement:
 Equipment Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

207619.51

Date

M	M
0	8

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14194

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.24		101.76		159.00

C. Full Name (Last, First, Middle Initial)
 Ricoh Customer Finance Corp.

Mailing Address

PO Box 310010273

City	State	Zip Code
Pasadena	CA	91110-0001

Purpose of Disbursement:
 Equipment Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221828.26

Date

M	M
0	8

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14195

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.50		43.55		68.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1161.74		2065.31		3227.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 60 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Ricoh Customer Finance Corp.

Mailing Address

PO Box 310010273

City

State

Zip Code

Pasadena

CA

91110-0001

Purpose of Disbursement:
 Equipment Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221987.26

Date M M / D D / Y Y Y Y
 08 / 22 / 2008

Transaction ID: H490219.E14196

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

57.24

101.76

159.00

B. Full Name (Last, First, Middle Initial)
 Compliance Consulting Company

Mailing Address

PO Box 365

City

State

Zip Code

Mc Lean

VA

22101-0365

Purpose of Disbursement:
 Compliance Consulting

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

206508.46

Date M M / D D / Y Y Y Y
 08 / 01 / 2008

Transaction ID: H490219.E14197

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4320.00

7680.00

12000.00

C. Full Name (Last, First, Middle Initial)
 Integra Telecom

Mailing Address

PO Box 34988

City

State

Zip Code

Seattle

WA

98124-1988

Purpose of Disbursement:
 Phone service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221760.21

Date M M / D D / Y Y Y Y
 08 / 22 / 2008

Transaction ID: H490219.E14198

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.80

99.19

154.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4433.04

7880.95

12313.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Dell Financial

Mailing Address

PO Box 120001

City	State	Zip Code
Dallas	TX	75312-

Purpose of Disbursement:
 Equipment Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

206778.65

Date

M	M
0	8

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14199

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.47		80.83		126.30

B. Full Name (Last, First, Middle Initial)
 Office Depot

Mailing Address

10520 SW Cascade Ave

City	State	Zip Code
Portland	OR	97223-4302

Purpose of Disbursement:
 Office supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

206596.85

Date

M	M
0	8

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14201

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.58		47.24		73.82

C. Full Name (Last, First, Middle Initial)
 Complete Campaigns

Mailing Address

3635 Ruffin Rd Fl 3

City	State	Zip Code
San Diego	CA	92123-1880

Purpose of Disbursement:
 Computer Support

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

211119.51

Date

M	M
0	8

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14202

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.05		288.07		450.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Erin Edelen

Mailing Address

PO Box 292

City State Zip Code
 Carlton OR 97111-0292

Purpose of Disbursement:
 Reimbursement--See below

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

206523.03

Date M M / D D / Y Y Y Y
 0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E14224

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.25

9.32

14.57

B. Full Name (Last, First, Middle Initial)
 U.S. Postmaster

Mailing Address

Lake Oswego Branch

City State Zip Code
 Lake Oswego OR 97035-

Purpose of Disbursement:
 Postage--OR GOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Postage--OR GOP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14.57

Date M M / D D / Y Y Y Y
 0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E14225

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.25

9.32

14.57

C. Full Name (Last, First, Middle Initial)
 Brianne Hyder

Mailing Address

7068 SW Valenta Ct

City State Zip Code
 Portland OR 97223-2260

Purpose of Disbursement:
 Reimbursement--See below

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194424.46

Date M M / D D / Y Y Y Y
 0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E14226

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.65

31.38

49.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.90

40.70

63.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Kinkos Salem

Mailing Address

2595 Commercial St SE

City	State	Zip Code
Salem	OR	97302-4448

Purpose of Disbursement:
 Shipping

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21
[MEMO ITEM]Shipping

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

49.03

Date

M	M
0	8

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14959

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.65

31.38

49.03

B. Full Name (Last, First, Middle Initial)
 Janice Williamson

Mailing Address

4065 Mandy Ave SE

City	State	Zip Code
Salem	OR	97302-1712

Purpose of Disbursement:
 Reimbursement--See below

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194375.43

Date

M	M
0	8

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14228

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.85

45.95

71.80

C. Full Name (Last, First, Middle Initial)
 U.S. Postmaster

Mailing Address

410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
 Postage--OR GOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21
[MEMO ITEM]Postage--OR GOP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

71.80

Date

M	M
0	8

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14229

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.85

45.95

71.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.85

45.95

71.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 64 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Gary Schmidt

Mailing Address

14462 SE Bridgeton St

City

State

Zip Code

Clackamas

OR

97015-6270

Purpose of Disbursement:
Reimbursement--See belowCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194508.46

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: H490219.E14230

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

30.24

53.76

84.00

B. Full Name (Last, First, Middle Initial)

U.S. Postmaster

Mailing Address

Lake Oswego Branch

City

State

Zip Code

Lake Oswego

OR

97035-

Purpose of Disbursement:
Postage--OR GOPCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21**[MEMO ITEM]** Postage--OR GOP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

84.00

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: H490219.E14231

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

30.24

53.76

84.00

C. Full Name (Last, First, Middle Initial)

Emmert Development Company

Mailing Address

11811 SE Highway 212

City

State

Zip Code

Clackamas

OR

97015-9038

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

224187.26

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	2	/	2	0	0	8

Transaction ID: H490219.E14243

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

612.00

1088.00

1700.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

642.24

1141.76

1784.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 65 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Dell Marketing LP

Mailing Address

PO Box 643561

City

Pittsburgh

State

PA

Zip Code

15264-3561

Purpose of Disbursement:

Computer Equipment

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

230223.03

Date

M M

0 8

D D

2 6

Y Y

2 0

Y Y

0 8

Transaction ID: H490219.E14244

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

528.61

939.74

1468.35

B. Full Name (Last, First, Middle Initial)

MicroAge

Mailing Address

PO Box 2941

City

Phoenix

State

AZ

Zip Code

85062-2941

Purpose of Disbursement:

Computer Equipment

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

216901.94

Date

M M

0 8

D D

0 6

Y Y

2 0

Y Y

0 8

Transaction ID: H490219.E14245

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2081.67

3700.76

5782.43

C. Full Name (Last, First, Middle Initial)

MicroAge

Mailing Address

PO Box 2941

City

Phoenix

State

AZ

Zip Code

85062-2941

Purpose of Disbursement:

Computer Equipment

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

228650.92

Date

M M

0 8

D D

2 2

Y Y

2 0

Y Y

0 8

Transaction ID: H490219.E14246

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1606.92

2856.74

4463.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4217.20

7497.24

11714.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 66 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Cory Stevens Properties LLC

Mailing Address

6400 SE Lake Rd Ste 200

City

State

Zip Code

Portland

OR

97222-2129

Purpose of Disbursement:

Rent

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

217912.02

Activity or Event Identifier:

ADMINISTRATION B 21

Date 08 / 11 / 2008

Transaction ID: H490219.E14247

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

273.63

486.45

760.08

B. Full Name (Last, First, Middle Initial)

LifeWise

Mailing Address

815 SW Bond St

City

State

Zip Code

Bend

OR

97702-

Purpose of Disbursement:

Insurance

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221605.22

Activity or Event Identifier:

ADMINISTRATION B 21

Date 08 / 22 / 2008

Transaction ID: H490219.E14250

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

255.20

453.70

708.90

C. Full Name (Last, First, Middle Initial)

Sprint

Mailing Address

P.O. Box 52243

City

State

Zip Code

Phoenix

AZ

85072-2243

Purpose of Disbursement:

Phone service

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

220896.32

Activity or Event Identifier:

ADMINISTRATION B 21

Date 08 / 22 / 2008

Transaction ID: H490219.E14252

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1074.35

1909.95

2984.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1603.18

2850.10

4453.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 67 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Dell Marketing LP

Mailing Address

PO Box 643561

City

Pittsburgh

State

PA

Zip Code

15264-3561

Purpose of Disbursement:

Computer Equipment

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

240007.04

Date

M M / D D / Y Y Y Y

0 8 / 2 9 / 2 0 0 8

Transaction ID: H490219.E14276

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1662.61

2955.74

4618.35

B. Full Name (Last, First, Middle Initial)

Textron Financial

Mailing Address

40 Westminster Street

City

Providence

State

RI

Zip Code

02903-

Purpose of Disbursement:

Rent

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

235127.65

Date

M M / D D / Y Y Y Y

0 8 / 2 9 / 2 0 0 8

Transaction ID: H490219.E14280

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1297.66

2306.96

3604.62

C. Full Name (Last, First, Middle Initial)

Cory Stevens Properties LLC

Mailing Address

6400 SE Lake Rd Ste 200

City

Portland

State

OR

Zip Code

97222-2129

Purpose of Disbursement:

Rent

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

240957.04

Date

M M / D D / Y Y Y Y

0 8 / 2 9 / 2 0 0 8

Transaction ID: H490219.E14281

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

342.00

608.00

950.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3302.27

5870.70

9172.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 68 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Gene Biggi Properties

Mailing Address

3800 SW Cedar Hills Blvd Ste 101

City	State	Zip Code
Beaverton	OR	97005-2003

Purpose of Disbursement:
 Rent

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

231523.03

Date

M	M
0	8

 /

D	D
2	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14282

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

468.00

832.00

1300.00

B. Full Name (Last, First, Middle Initial)
 World Trade Center & Catering

Mailing Address

PO Box 3340

City	State	Zip Code
Portland	OR	97208-

Purpose of Disbursement:
 Catering/ORGOP

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

235388.69

Date

M	M
0	8

 /

D	D
2	9

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14283

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

93.97

167.07

261.04

C. Full Name (Last, First, Middle Initial)
 Andrew Over

Mailing Address

1485 SW 134th Ave

City	State	Zip Code
Beaverton	OR	97005-0986

Purpose of Disbursement:
 Reimbursement--See Below

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

207460.51

Date

M	M
0	8

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14772

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

245.47

436.39

681.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

807.44

1435.46

2242.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 69 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 U.S. Postmaster

Mailing Address

410 Mill St SE

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
 Postage--OR GOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Postage--OR GOP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42.00

Date 08 / 06 / 2008

Transaction ID: H490219.E14168

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.12

26.88

42.00

B. Full Name (Last, First, Middle Initial)
 Verizon Wireless

Mailing Address

PO Box 9622

City	State	Zip Code
Mission Hills	CA	91346-9622

Purpose of Disbursement:
 Phone service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Phone service

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

639.86

Date 08 / 06 / 2008

Transaction ID: H490219.E14169

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

230.35

409.51

639.86

C. Full Name (Last, First, Middle Initial)
 Andrew Over

Mailing Address

1485 SW 134th Ave

City	State	Zip Code
Beaverton	OR	97005-0986

Purpose of Disbursement:
 Reimbursement--See Below

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

188649.01

Date 08 / 01 / 2008

Transaction ID: H490219.E14773

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

553.67

984.31

1537.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

553.67

984.31

1537.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 70 / 72

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Office Depot

Mailing Address

10520 SW Cascade Ave

City

State

Zip Code

Portland

OR

97223-4302

Purpose of Disbursement:
 Office supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

67.98

Date

M M / D D / Y Y Y Y

0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E14234

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.47

43.51

67.98

B. Full Name (Last, First, Middle Initial)
 U.S. Postmaster

Mailing Address

410 Mill St SE

City

State

Zip Code

Salem

OR

97301-

Purpose of Disbursement:
 Postage--OR GOP

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Postage--OR GOP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1470.00

Date

M M / D D / Y Y Y Y

0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E14233

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

529.20

940.80

1470.00

C. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91155

City

State

Zip Code

Seattle

WA

98111-9255

Purpose of Disbursement:
 Phone service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

206652.35

Date

M M / D D / Y Y Y Y

0 8 / 0 6 / 2 0 0 8

Transaction ID: H490219.E14886

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.98

35.52

55.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.98

35.52

55.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 71 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Discover Corporate Card

Mailing Address

PO Box 30423

City

State

Zip Code

Salt Lake City

UT

84130-0423

Purpose of Disbursement:

Credit Card Payment: See below

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

190449.01

Date

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E15038

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

180.00

320.00

500.00

B. Full Name (Last, First, Middle Initial)

Alaska Airlines

Mailing Address

530 SW Madison St

City

State

Zip Code

Portland

OR

97204-1021

Purpose of Disbursement:

Travel

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

[MEMO ITEM]Travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

278.80

Date

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E14237

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

100.37

178.43

278.80

C. Full Name (Last, First, Middle Initial)

Discover Corporate Card

Mailing Address

PO Box 30423

City

State

Zip Code

Salt Lake City

UT

84130-0423

Purpose of Disbursement:

Credit Card Fees

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 21

[MEMO ITEM]Credit Card Fees

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221.20

Date

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: H490219.E15039

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

79.63

141.57

221.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

180.00

320.00

500.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 72 / 72
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Discover Corporate Card

Mailing Address

PO Box 30423

City	State	Zip Code
Salt Lake City	UT	84130-0423

Purpose of Disbursement:
 Credit Card Payment: See below

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

222237.26

Date

M	M
0	8

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E15040

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

B. Full Name (Last, First, Middle Initial)
 Leftys Pizza

Mailing Address

1230 State Street

City	State	Zip Code
Salem	OR	97301-

Purpose of Disbursement:
 Food

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Food

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57.00

Date

M	M
0	8

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E14240

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.52		36.48		57.00

C. Full Name (Last, First, Middle Initial)
 Discover Corporate Card

Mailing Address

PO Box 30423

City	State	Zip Code
Salt Lake City	UT	84130-0423

Purpose of Disbursement:
 Credit Card Fees

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 21

[MEMO ITEM] Credit Card Fees

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

193.00

Date

M	M
0	8

 /

D	D
2	2

 /

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490219.E15041

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.48		123.52		193.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.00		160.00		250.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
20080.01	35697.78	55777.79